

RESEARCH INTEGRITY		Standard Operating Procedure		
Title	Management of Research Misconduct			
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1 COMPILATION AND AUTHORISATION

Action	Designated person	Date	Signature
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	Deputy Deans: Research and Innovation (FEDUC, FEMS, FHS, FHUM, FNAS). Executive Deans (FENG, FLAW, FTHEO).	March 2022	
Reviewed and approved by:	Registrar (Prof Marlene Verhoef) Legal Office (Mr Kobus Joubert)		Jan 2021
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2 DISTRIBUTION

Department/Unit	Name	Date	Signature
Research and School Directors, academic staff, and postgraduate students in the Faculty.		August 2022	

3 DOCUMENT HISTORY

Date	Version no	Reason for revision
April 2022	1	SOP approved
November 2022	2	SOP updated

4 PURPOSE OF THE SOP

To provide guidelines and procedures for the Deputy Dean: Research and Innovation (DD: R&I) and the Executive Dean (ED) of the Faculty, as well as persons seeking to report allegations of research misconduct by a researcher (staff member, undergraduate or postgraduate student), on a) reporting and b) conducting an informal initial intra-faculty research integrity assessment, followed by either 1) a formal intra-faculty research integrity assessment for cases of plagiarism (note not "investigation"), or 2) a preliminary intra-faculty research integrity investigation for cases of fabrication or falsification, into the said allegations. The reason for the difference in 1) and 2) is that the Policy on Academic Integrity, 27 September 2018, revised 2021, allows for an internal investigation into plagiarism by the office of the Registrar or the student judicial office, but in cases of fabrication and/or falsification the internal investigation should be conducted by the Faculty before escalating the case to the office of the Registrar or the student judicial office.

It is in the interest of society and the research community that allegations of research misconduct be handled *consistently* and *transparently* with clear processes and procedures for dealing with these allegations. If such allegations are proven to be true, this can have negative implications (e.g., reputational damage) for the researcher, the research entity, the faculty, the University, as well as colleagues, students, human research participants or animals used in research, funding bodies and journal publishers (adapted from UCT, 2014).

This SOP for management of research misconduct seeks to find a balance between:

i) Providing safeguards for those who raise genuine concerns about allegations of research misconduct,

and

ii) Providing protection against uninformed, inaccurate, and malicious allegations that can cause serious harm to innocent persons as well as to the University (adapted from UCT, 2014).

The balance is found in:

An initial *informal intra-faculty research integrity assessment* by only the DD: R&I (in larger Faculties) or the ED (in smaller Faculties) and the Research Integrity Officer (RIO) in the office of the Deputy Vice-Chancellor: Research and Innovation (DVC: R&I), without the involvement of the person making the allegations (alleger) or the person against whom the allegations are being made (alleged). The merit and formal grounds of the allegation are assessed.

The mentioned initial informal intra-faculty research integrity assessment is followed by one of the following **two processes**:

• For plagiarism:

A follow-up **formal intra-faculty research integrity assessment** by the DD: R&I (in larger Faculties) or the ED (in smaller Faculties) as chairperson, the RIO in the office of the DVC: R&I, and the appointed Standing Research Integrity Committee (SRIC) with an optional additionally appointed independent consulting attorney in the legal office to see whether the allegation of **plagiarism in research** has merit and formal grounds to justify an escalation to the office of the Registrar or the student judicial office as a *formal investigation into research misconduct*. In the case of plagiarism in research the office of the Registrar or the student judicial office is responsible for the *internal process of evaluation* of the suspected plagiarism by a plagiarism expert (See the NWU Policy on Academic Integrity sections 1.2, 2.4, or 3.2).

• For fabrication or falsification:

A follow up *preliminary intra-faculty research integrity investigation* by the DD: R&I (in larger Faculties) or the ED (in smaller Faculties) as chairperson, the RIO in the office of the DVC: R&I, and the Standing Research Integrity Committee (SRIC) as well as appointed independent ad hoc members in cases of suspected *fabrication and/or falsification,* to see whether the allegations have merit and formal grounds. In the case of fabrication and/or falsification the *preliminary intra-faculty investigation* is conducted in the Faculty by the SRIC, involving a consulting independent attorney in the legal office and two independent knowledgeable experts as

ad hoc members. If a "defensible" finding is made by the SRIC and independent ad hoc members, the case is referred to the office of the Registrar or the student judicial office as a *formal investigation into academic misconduct* with the necessary evidence and expert reports at hand to continue with the *disciplinary process for students* or the *external process for staff* (See the NWU Policy on Academic Integrity sections 1.3, 2.5 and 3.3 of the).

5 SCOPE

This SOP guides different parties on how to handle allegations of:

1) Research misconduct through an act of *plagiarism in research* for a staff member or student.

2) Research misconduct through an act of *fabrication and/or falsification* for a staff member or student.

The definitions provided under section 6 guide the specific interpretation and use of terminology used in this SOP.

A detailed process description is provided of the initial informal and more formal intra-faculty research integrity processes for both *plagiarism* and *fabrication and/or falsification*, leading to an escalation to the office of the Registrar or the student judicial office for a *formal investigation into research misconduct* if a "defensible" finding of research misconduct is made during the intra-faculty processes (See the *NWU Policy on Academic Integrity of 27 September 2018 revised 2021*).

Note: The DD: R&I, ED, RIO in the office of the DVC: R&I, SRIC and independent ad hoc members always retain the right to rather refer any case of reported research misconduct to be handled as an intra-faculty assessment process of *research non-compliance and/or violation of good research practice*, if a "non-defensible" finding of research misconduct is made but the case does fall within the ambit of research non-compliance and/or violation of good research Integrity_1 for the management of non-compliance and/or violation of good research practice). A choice could also be made to follow the route of disciplinary action involving People and Culture (P&C) (See *NWU Behavioural Manual* for a staff member or the *NWU Policy on Student Discipline, 26 September 2019* for an undergraduate or postgraduate student) for the same reason.

Abbreviation	Description
DD: R&I	Deputy Dean: Research and Innovation
ED	Executive Dean
RD	Research Director
SD	School Director
RIO	Research Integrity Officer in the office of the DVC: R&I
RI	Research Integrity
SRIC	Standing Research Integrity Committee
DVC: R&I	Deputy Vice-Chancellor: Research and Innovation
REC	Research Ethics Committee
RCR	Responsible Conduct of Research
Concepts	Definitions
Research	Research includes the activities that are aimed at improving knowledge of any discipline through enquiry or systematic investigation. This applies to Research, whether in the public interest or not, or whether the Research is published or not.
	It refers to all academic Research conducted as part of any academic programme in any subject, including Agricultural Sciences, Earth Sciences, Economic Sciences, Education, Health/Medical Sciences, Humanities, Life

6 ABBREVIATIONS AND/OR DEFINITIONS

	Sciences, Mathematical Sciences, Physical Sciences, Social Sciences, Theology and Technological and Engineering Sciences.
	Scientific Research conducted by public or private bodies (regardless of whether the Research is privately or publicly funded).
	Commercial or industrial Research aimed at developing or improving products or services.
	Technological development and demonstration (e.g., prototype development, testing, user trials). (Adapted for the ASSAF Draft POPIA Code of Conduct for research, 2022).
Larger Faculties	Faculty of Education (EDUC)
	Faculty of Economic and Management Sciences (FEMS)
	Faculty of Health Sciences (FHS)
	Faculty of Humanities (FHUM)
	Faculty of Natural and Agricultural Sciences (FNAS)
Smaller Faculties	Faculty of Engineering (FENG)
	Faculty of Law (FLAW)
	Faculty of Theology (FTHEO)
Responsible Conduct of Research (RCR)	The act of making research integrity visible; refers to the practice of scientific investigation with <i>responsibility and integrity</i> through an awareness and application of established <i>professional research norms/standards</i> and <i>ethical principles</i> in the performance of all activities related to the research.
Breach in Research Integrity	The finding of a <i>formal intra-faculty research integrity assessment</i> (research non-compliance, violation of good research practice or plagiarism) or <i>preliminary intra-faculty research integrity investigation</i> (fabrication or falsification) that a researcher has transgressed/potentially transgressed in responsible conduct of research/research integrity based on the mentioned acts.
	Note: No appeals process can be followed for a case escalated to the office of the Registrar or student judicial office as no finding has been made.
Non-compliance	Any violation of:
	• Any institutional and/or REC <i>policies, procedures</i> and <i>regulation</i> governing human, animal, or environmental research or other types of research practices that might impact society.
	Any deviation from the REC-approved proposal/protocol.
	Non-compliance varies in <i>nature, severity,</i> and <i>frequency</i> (adapted from UCT, 2013).
Minor Non-compliance	A non-compliant incident that <i>does not</i> :
	Affect the safety of human participants, animals, or environment.
	Affect the safety of society due to other types of research practices.
	Compromise data integrity.
	Violate participants' rights or welfare.
	 Affect participants' willingness to participate in research.
	Examples include but are not limited to:
	 Inadvertent errors due to inattention to detail ("honest human errors").

		Misunderstanding or oversight.
		 Missed deadline for a continuing review (adapted from UCT, 2013).
Serious	Non-com-	An activity that jeopardises:
pliance	NOII-COIII-	 The safety, rights or welfare of human participants or animals.
•		 The environment.
		The integrity of the data during research.
		Examples include but are not limited to:
		Conducting research without Scientific Committee approval.
		Conducting research with humans, animals, or the environment without REC approval.
		• Conducting any other type of research with an indicated risk factor without REC approval.
		Not using approved REC documentation.
		 Using NWU student or staff data for research purposes without the necessary approval from specified structures i.e., RDGC (gatekeeper).
		• Inadequate training and supervision of researchers (academics and students).
		• Current REC-approved informed consent form describing all potential risks and alternatives to participants is not used.
		Failure to obtain voluntary informed consent.
		• Enrolling human participants that do not meet the inclusion criteria or including those that meet the exclusion criteria.
		• Failure to follow accepted procedures to exercise due care in avoiding harm or discomfort to participants or research staff.
		• Deviation from or failure to adhere to the approved proposal/protocol without prior approval by the REC.
		 Implementing substantive modifications to REC-approved proposals/protocols without prior REC approval.
		• Activities that compromise the participants' privacy and confidentiality.
		 Continuing with research when REC approval has lapsed.
		Copyright infringement.
		• Negligent management of data security (adapted from the European Code of Conduct for Research Integrity (ECCRI), 2017 and UCT, 2013 and 2014).
		Note:
		Should a researcher conduct research with humans or animals without REC approval, the process will be escalated for disciplinary <i>action</i> .
		The right to escalate is retained even if it falls within the defined acts of non- compliance or violation of good research practice covered in the related SOP.
Continuous pliance	Non-com-	A series of <i>more than one non-compliant or violating behaviour</i> in reasonably proximity (one year) that, if unaddressed, may compromise the research integrity. This can be due to lack of <i>knowledge</i> or <i>commitment</i> on the part of the researcher(s).
		The <i>conduct continues</i> after the researcher has explicitly been made aware of the first instance of non-compliant or violating behaviour and despite an attempt to assist the researcher in this regard, the conduct continues.

	Examples include but are not limited to:
	Repeated failure to follow institutional and REC policies and
	 Repeated failure to follow institutional and REC policies and procedures, particularly after the researcher has been informed of the problem(s) and that corrective action needs to be taken.
	A researcher has a record of non-compliance, violations, or misconduct over a long period or in several existing or previously approved studies (adapted from UCT, 2013).
Violation of good Research Practice	Violations of good research practice that damage the integrity of the research process or researchers and that lead to " <i>questionable research practices</i> ".
	Examples include but are not limited to:
	• Direct violation of good research practices set out in the <i>NWU Code of Conduct for Researchers</i> or other national codes of conduct for researchers and members of RECs and other regulatory requirements.
	• Manipulating authorship or denigrating the role of other researchers in publications.
	• Citing selectively to enhance own findings or to please editors, reviewers, or colleagues.
	Self-citing to enhance own research index.
	Deliberate misrepresentations in publications.
	Expanding unnecessarily the bibliography of a study.
	• Establishing or intentionally supporting journals that undermine the quality control of research (predatory journals).
	Using ghost writers to produce articles.
	• Incorrectly using university affiliation to gain access to subsidized funding.
	Not following "good practice" guidelines in collaborative research.
	Withholding research results.
	• Exaggerating the importance and practical applicability of findings.
	Misrepresenting research achievements.
	• Inflating own research image during research assessment within the university or with external bodies or inflating own research profile.
	Improper conduct in peer review.
	• Delaying or inappropriately hampering the work of other researchers (academics or students).
	• Allowing funders/sponsors to jeopardise independence in the research process or reporting of results to introduce or promulgate bias.
	• Accusing a researcher of misconduct or other violations in a retaliating, intimidating and malicious way.
	• Ignoring putative violations of research integrity by others or covering up inappropriate responses to misconduct or other violations by institutions.
	• Misusing seniority to encourage violations of research integrity (adapted from ECCRI, 2017 and UCT, 2014).
	Note : The right to escalate is retained even if it falls within the defined acts of non-compliance or violation of good research practice covered in this SOP.
Research Misconduct	Refers to the FFP categorisation:
	Fabrication
	Falsification

	 Plagiarism in Proposing Performing Reviewing research Reporting results
Fabrication	Making up of results and recording them as if they were real.
Falsification	Manipulating research materials, equipment, processes, or findings, or changing, omitting, or suppressing data or results without justification.
• Plagiarism	 Using other people's work and ideas in research without giving proper credit to the original source, thus violating the rights of the original author(s) to their intellectual outputs. Or Re-publishing substantive parts of one's own earlier publications, including translations, without duly acknowledging or citing the original (self-plagiarism), as well as copying text in various sections of a research report without referencing the earlier use. Also see definition of plagiarism in the NWU Policy on Academic Integrity: Annexure 1.
Copyright infringement	 The use of work protected by <i>copyright</i> law without permission. <i>Infringing</i> certain exclusive rights granted to the copyright holder, such as the right to: Reproduce the protected work. Distribute the protected work. Display the protected work. Perform the protected work. Make derivative work. Also see definition of copy right infringement in the NWU Policy on Academic Integrity: Annexure 1.
Allegation	A report that represents an <i>unproven assertion</i> .
Alleger	The person (a researcher, any other member of a research team, a REC member, research participants or a community member) who raises awareness of possible research misconduct by a researcher (academic or student).
Alleged	The researcher (academic or student) accused of research non-compliance and/or violation of good research practice, continuous research non- compliance and/or violation of good research practice or research misconduct.
Informal Intra-faculty Research Integrity Assessment	An initial informal intra-faculty research integrity assessment process conducted by the DD: R&I of the Faculty (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I, into the <i>merits and formal grounds of the allegation</i> of potential research misconduct, before proceeding to the more formal intra-faculty research integrity assessment (for plagiarism) or preliminary intra-faculty research integrity investigation (for fabrication and/or falsification). The type of misconduct will guide the process that follows and which RI SOP to follow.
Formal Intra-faculty Research Integrity Assessment (Acts of <i>Plagiarism</i>)	A formal intra-faculty research integrity assessment into the allegations of research misconduct through an act of <i>plagiarism</i> . This process is conducted by the DD: R&I of the Faculty as chairperson (in the larger Faculties) or the ED (in the smaller Faculties), the RIO in the office of the DVC: R&I, the appointed Standing Research Integrity Committee (SRIC), and the optional appointed independent consulting attorney should the allegation seem to have merit and

	formal grounds and if it justifies a formal investigation by the office of the Registrar or the student judicial office.
Preliminary Research Integrity Investigation (Acts of <i>Fabrication of</i> <i>Falsification</i>)	A preliminary intra-faculty research integrity investigation into allegations of research misconduct through an act of <i>fabrication or falsification</i> . This process is conducted by the DD: R&I as chairperson (in the larger Faculties or the ED (in the smaller Faculties), the RIO in the office of the DVC: R&I, the appointed Standing Research Integrity Committee (SRIC), as well as specified independent ad hoc members (attorney in the legal office and two experts) should the allegation seem to indicate a breach in research integrity through acts of fabrication and/or falsification.
Disciplinary action	The formal faculty or university process of a disciplinary procedure taken against a staff member (involving People and Culture) or student (involving the student judicial office).
Escalation	• The process of referring a "defensible" finding of <i>potential research misconduct</i> for a <i>formal investigation into academic misconduct</i> by the office of the Registrar of the University or the student judicial office (See the NWU Policy on Academic Integrity, 27 September 2018 revised 2021). Always with cases of research misconduct (fabrication, falsification, plagiarism) and copyright infringement.
	However, other cases of serious breaches must also be referred to the office of the Registrar of the student judicial office. Examples:
Formal Investigation	 Not obtaining Scientific Committee or Research Ethics Committee approval for any research (academics or students) at the NWU. Using NWU student or staff data for research purposes without the necessary approval from specified structures i.e., RDGC (gatekeeper). Inflating own research image during research assessment within the university or with external bodies. Intentional publication in predatory journals. Acts described in the Staff behavioural manual i.e.: Any act or behaviour which has an element of dishonesty and/or misappropriation which could cause/causes detriment to the University and/or other person. Any conduct that negatively affects the integrity, good name and/or public image of the University. Any violation of any regulation governing human, animal or environmental research or any deviation from the REC approved proposal/protocol. Insubordination and defying the authority.
Formal Investigation	The process of an investigation into research misconduct (fabrication, falsification, plagiarism) by the Registrar and people appointed by him/her to conduct the various phases of the investigation or the student judicial office (See the <i>NWU Policy on Academic Integrity, 27 September 2018 revised 2021</i>).
Finding of a Breach in Research Integrity	A result concluding that an allegation of 1) research non-compliance and/or violation of good research practice, 2) continuous research non-compliance and/or violation of good research practice or 3) research misconduct is true based on the preponderance of the evidence.
Research Integrity Officer (RIO)	A person appointed in the office of the DVC: R&I to facilitate research integrity (RI) within the Faculty through various functions, i.e. expanding the development of IRIMS, supporting the development and maintenance of processes, procedure and SOPs related to research integrity on Faculty level,

	as well as managing RCR/RI within the Faculties through guidance of how to
	foster a climate of Responsible Conduct of Research (RCR), as well as handling reported breaches/transgressions in RI/RCR. Also acts in an advising capacity to the DVC: R&I, ED, and DD: R&I. The person is not appointed in a research management position to ensure no potential conflict of interest.
Standing Research Integrity Committee	consisting of an acific members
(SRIC)	In the five larger Faculties:
	Chairperson: DD: R&I.
	Research Integrity Officer in the office of the DVC: R&I.
	• Chairperson of the Faculty Research Ethics Committee (Faculty REC) or if such a person exists within the Faculty, the Head of the Ethics Office.
	• An elected Research Director in the Faculty (<i>appointed for three years</i>).
	 Secretariat provided by the Faculty (to sign a confidentiality agreement).
	In cases of <i>plagiarism</i> a consulting attorney in the legal office may be included.
	In cases of <i>fabrication and falsification</i> the following independent ad hoc members are included:
	Consulting attorney in the legal office.Two subject experts appropriate to the case at hand.
	In the four smaller Faculties:
	Faculty of Engineering:
	 Chairperson: ED: R&I. Research Integrity Officer in the office of the DVC: R&I. Chairperson of the Faculty Research Ethics Committee (Faculty REC). An elected Research Director in the Faculty (<i>appointed for three years</i>). Secretariat provided by the Faculty (to sign confidentiality agreement).
	 Chairperson: ED. Research Integrity Officer (in the office of the DVC: R&I). Chairperson of the Faculty Research Ethics Committee (Faculty REC). The Research Director in the Faculty. The Postgraduate Director. Secretariat: Provided by the Faculty (to sign confidentiality agreement).
	Faculty of Theology:
	 Chairperson: ED. Research Integrity Officer in the office of the DVC: R&I. Research Directors of the research entities in the Faculty. Secretariat provided by the Faculty (to sign a confidentiality agreement).
	In cases of <i>plagiarism</i> a consulting attorney in the legal office may be included.
	In cases of <i>fabrication and falsification</i> the following independent ad hoc members are included:
	Consulting attorney in the legal office.Two subject experts appropriate to the case at hand.

Integrated Integrity M	Research /anagement	The integrated system used by the Faculty to manage research integrity in such a way that it:
System	-	1) Fosters a climate of Responsible Conduct of Research (RCR).
		2) Effectively manages potential breaches in RCR/RI through acts of:
		i) Research non-compliance.
		ii) Violation of good research practice.
		iii) Research misconduct.
		3) Effectively manages possible appeals stemming from research integrity assessments or investigations on an intra-faculty level.

7 VALUES UNDERPINNING THE NORTH-WEST UNIVERSITY'S ATTITUDE TOWARDS ALLEGATIONS OF RESEARCH MISCONDUCT

The North-West University believes:

- in the importance of impeccable research ethical standards and research integrity;
- that reporting of suspected research misconduct is a shared and serious responsibility of all members of the Faculty;
- that allegations must be dealt with equitably, confidentially and as expeditiously as possible taking care that all interested persons have the opportunity to be heard;
- that the procedure for dealing with allegations must be accessible, understandable, fair, transparent and expeditious;
- that the faculty has a responsibility to protect the rights and reputations of all individuals, including the person against whom an allegation is made and the person who makes the allegation;
- that a formal assessment is dealt with in terms of existing faculty and university procedures (adapted from UCT, 2014).

8 **RESPONSIBILITIES**

It is the primary responsibility of the Faculty within the bigger NWU, to protect the integrity of all research conducted by the researchers (academics, undergraduate and postgraduate students) of the Faculty, as the value and benefits of this research are vitally dependent on the integrity of the research. Should there be any possibility of a breach in research integrity through research misconduct (fabrication, falsification or plagiarism) the Faculty has to follow a process that will ensure that these allegations are assessed and handled in a *transparent* and *accountable* way in accordance with the highest standard of *integrity*, *fairness, due process* and *reasonableness*. Persons who are tasked with the management of this assessment process into allegations of research misconduct must act with the utmost *integrity* and *sensitivity*. Conflict of interest must be avoided, while the achievement of it is to be promoted (adapted from UCT, 2014).

8.1 Various role players have different responsibilities in this process:

The specific responsibilities of the various role players are set out with a more detailed step by step process under the *process* discussed in section 9.3.

8.1.1 The researchers

Researchers (academics, undergraduate and postgraduate students) must master the research knowledge, methodologies and ethical practices associated with their field and follow good research practices that will ensure *"responsible conduct of research* (RCR)". The researchers are expected to comply with all ethical principles, norms and standards, research integrity principles and responsibilities, as well as regulations, laws, and conditions placed on the conduct of the study.

8.1.2 The alleger

The person(s) (a researcher, any other member of a research team, a Research Ethics Committee (REC) or REC member, academic, research participants, community member, or dissertation/thesis examination committee) with allegations, observations or evidence of potential research misconduct who follow(s) any one of several processes to bring this to the attention of the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I.

Must share requested experiences or provide requested documentation and/or data.

Clarifies any uncertainties the SRIC and ad hoc members may require.

If required, acts as a witness during the formal investigation conducted by the Registrar.

8.1.3 The alleged

The researcher against whom the allegations of a possible breach in responsible conduct of research (RCR)/research integrity (RI) through research misconduct are being made, must offer his/her full cooperation in the assessment or investigation of the allegation(s) by sharing requested experiences or by providing requested documentation and/or data.

It should be clear to the researcher that he/she is protected until the allegations are determined to be defensible.

Should be willing to present his/her case to the SRIC and ad hoc members.

8.1.4 The Deputy Dean: Research and Innovation

Note: If it is a smaller Faculty the ED fulfils all the functions mentioned below.

For the informal intra-faculty assessment:

The DD: R&I of the Faculty must launch an initial informal intra-faculty assessment with the support of the RIO linked to the office of the DVC: R&I into the *merit or formal grounds for the allegation(s)* of research misconduct (fabrication, falsification, plagiarism), before proceeding to the next more formal process.

If the allegation(s) seem(s) to have *merit and formal grounds*, the DD: R&I as chairperson of the SRIC and the RIO in the office of the DVC: R&I, initiates either a *formal intra-faculty research integrity assessment* (plagiarism) or a *preliminary intra-faculty research integrity investigation* (fabrication and/or falsification).

For the formal intra-faculty research integrity assessment of cases of potential plagiarism:

The DD: R&I as chairperson, the RIO in the office of the DVC: R&I and the SRIC and consulting attorney in the legal office if required first meet with the alleger, to come to findings on the merit and formal grounds for the allegation of plagiarism.

The DD: R&I as chairperson, the RIO and the SRIC and consulting attorney if required meet with the alleged to hear his/her side of the story.

The DD: R&I with the support of the RIO finalises the letter to escalate the case to the Registrar or the student judicial office.

The DD: R&I with the support of the RIO finalises the letter to the alleged indicating the process of escalation and the future process.

The DD: R&I and the RIO set up a meeting and discuss the way forward with the ED of the Faculty to finalise the planned actions and for him/her to co-sign the necessary letters.

The DD: R&I with the support of the RIO calls for a meeting with the two Directors (Research and School) in which the researcher resides, to discuss the findings and future actions.

The DD: R&I notifies the researcher in writing of the escalation to the office of the Registrar or the student judicial office.

The DD: R&I with the support of the RIO verbally notifies the alleger of the outcome.

The DD: R&I with the support of the RIO sets up a meeting with the Registrar or the head of the student judicial office to hand over the letter and supporting documents and explain the case. The ED is also present.

The DD: R&I and RIO evaluates the progress of the process with the Registrar's office or the student judicial office and signs off on the finalisation of the process when the outcome is known.

The DD: R&I with the support of the secretariat sets up and manages an effective data record system and registry with a track record of cases (allegations, processes, letters, and reports).

For the preliminary intra-faculty research integrity investigation into cases of potential fabrication and/or falsification:

The DD: R&I and the RIO in the office of the DVC: R&I concur on the appointment of the independent attorney in the legal office and two independent experts as ad hoc members.

The DD: R&I with the support of the RIO provides the two experts with the allegation(s) and the necessary documentation and/or data to launch an independent investigation based on the documentation and/or data.

The DD: R&I with the support of the RIO calls for a meeting with the SRIC and ad hoc members.

The DD: R&I with the support of the RIO presents the case, documents, and reports to the SRIC and ad hoc members.

The DD: R&I as chairperson, the RIO, the SRIC and independent ad hoc members first meet with the alleger, to evaluate the merit and formal grounds of the allegation(s) of fabrication and/or falsification.

The DD: R&I as chairperson, the RIO, the SRIC, and independent ad hoc members meet with the alleged to hear his/her side of the story.

The DD: R&I with the support of the RIO finalises the letter to escalate the case to the Registrar or the student judicial office. Note: It should be clear that the experts confirm the allegation made by the alleger.

The DD: R&I with the support of the RIO finalises the letter to the alleged indicating the escalation and future processes.

The DD: R&I and the RIO set up a meeting and discuss the way forward with the ED of the Faculty to finalise the planned actions and for him/her to co-sign the two letters.

The DD: R&I with the support of the RIO calls for a meeting with the two Directors (Research and School) in which the researcher resides to discuss the findings and future actions.

The DD: R&I notifies the researcher in writing of the escalation to the office of the Registrar or the student judicial office.

The DD: R&I with the support of the RIO verbally notifies the alleger of the outcome.

The DD: R&I with the support of the RIO sets up a meeting with the Registrar or the head of the student judicial office to hand over the letter and supporting documents and explain the case. The ED is also present.

The DD: R&I and RIO evaluates the progress of the process with the Registrar's office or the student judicial office and sign off on the finalisation of the process when the outcome is known.

The DD: R&I with the support of the secretariat sets up and manages an effective data record system and registry with a track record of cases (allegations, processes, letters, and reports).

8.1.5 The Research Integrity Officer

The RIO acts as advisor and support to the DD: R&I and ED throughout all processes of alleged potential research integrity breaches and the assessment thereof.

• Receives the allegation(s) with the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties).

- Supports the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) in deciding on the merit and formal grounds.
- Sets up meetings with the SRIC and independent ad hoc members if deemed necessary.
- Oversees the secretariat in setting up meetings and taking minutes during meetings.
- Supports the DD: R&I (in larger Faculties) or the ED (in smaller Faculties) to set up the letter to the alleged notifying him/her of the escalation.
- Supports the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) in writing the letters to the Registrar or the student judicial office and the alleged.
- Supports the DD: R & I (in the larger Faculties) or the ED (in the smaller Faculties) to write a letter to the Chairperson of the Faculty REC or the Head of the Ethics Office to notify him/her should a study be affected.
- Joins the DD: R&I (in the larger Faculties) in feedback meetings with the ED.
- Writes the final summative report.
- Where a case needs to be escalated to the office of the Registrar or the student judicial office, helps with organising supporting documentation and/or data and set up the handover meeting.
- Joins the DD: R&I and ED in the handover meeting with the Registrar or the head of the student judicial office.

Support from the secretary allocated for this purpose by the Faculty:

- Allocates a case number from the Research Integrity Register of the Faculty.
- Sets up meetings and keeps minutes.
- Keeps records of all evidence.
- Ensures that progress reports reach the office as indicated and closes cases.
- Gives monthly status reports of RI cases to the DD: R&I (in larger Faculties) and ED.
- Ensure that required reports are submitted to the DD: R&I (in larger Faculties), ED, and Faculty Board.

8.1.6 The Executive Dean in Larger Faculties

The ED listens to the report on the outcomes of the assessment or preliminary investigation of the SRIC and ad hoc members presented to him/her by the DD: R&I (in larger Faculties) and the RIO in the office of the DVC: R&I, gives his/her stamp of approval to the way forward and co-signs the necessary letters to the Registrar or the head of the student judicial office.

Keeps up to date with all active RI cases.

8.1.7 The Research Directors

The RDs report any possible allegations of a potential breach in RCR/RI reported to them to the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO in the office of the DVC: R&I.

8.1.8 The Chairperson of the Faculty REC or Head of the Ethics Office for Research

The Chairperson of the Faculty REC or Head of the Ethics Office reports any allegations of potential research misconduct reported to him/her via the complaints processes to the DD: R&I (in larger Faculties) or ED (in smaller Faculties) and the RIO in the office of the DVC: R&I.

The Chairperson/Head forms part of the SRIC.

8.1.9 The School Directors

The SDs report any allegations of potential research misconduct reported to them to the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO in the office of the DVC: R&I.

8.1.10 The independent attorney in the legal office

Offers legal advice during the progress of the case.

Attends the SRIC meeting(s) when included.

8.1.11 The independent experts

Review the documents and/or data provided by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO for proof of the allegation of *fabrication and/or falsification*.

Write a report within **10 working days** after receiving the documentation and/or data and provide it to DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO.

Attend the SRIC meeting(s) and present the report to the SRIC.

Should be prepared to act as a witness during the formal investigation by the office of the Registrar.

9 PROCEDURE(S)

9.1 The principles underpinning the process of handling allegations of research misconduct

- Procedural fairness.
- Natural justice.
- Due process.
- Integrity.
- Confidentiality ("need-to-know rule").
- One assessment where possible.

9.2 Questions that guide the procedural framework

- Who receives the allegation(s)?
- Who takes the first step(s)?
- Who appoints the SRIC?
- Who requests the independent consulting attorney in the legal office to be present?
- Who appoints the two independent experts?
- Who does the formal intra-faculty research integrity assessment into cases of plagiarism?
- Who does the preliminary intra-faculty research integrity investigation into cases of fabrication and/or falsification?
- How are these processes managed?
- How are the outcomes managed?

Note: The details of this procedural framework are explained in the rest of the document.

9.3 The process

The process focuses on the reporting of potential research misconduct and the steps in handling these allegations.

9.3.1 Reporting of possible research misconduct

The alleger(s), with allegations based on observations or evidence of research misconduct (plagiarism, fabrication, falsification), may choose to follow any one of several processes to bring this to the attention of the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) of the Faculty and the RIO in the office of the DVC: R&I.

Another form of reporting will originate from dissertation/thesis examination committees. Possible acts of research misconduct mentioned by an examiner in an examiners report should be deliberated on during an examination committee to see whether these have merit and formal grounds to be *classified* as research misconduct. It is, however, not the responsibility of the examination committee to stipulate possible actions. The examination committee should follow the route of reporting the potential breach to the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I as a case of potential research misconduct through an act of *plagiarism, fabrication,* or *falsification.*

In all cases of reporting, it must be very clear from the start whether it is:

- Just a process of seeking advice. Or
- A process of making a formal allegation.

An allegation can come to the attention of the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I through:

- Direct notification to the office of the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I by any mentioned alleger.
- A process of Whistleblowing using SOP_NWU_Research Integrity_7. Management of Whistleblowing pertaining to Research Ethics and Research Integrity. This process is used should the alleger wish to remain anonymous.
- A report to or by a chairperson of one of the Faculty RECs.
- A report to or by the Head of the Ethics Office.
- A report to or by one of the Research or School Directors in the Faculty.
- A report by a dissertation/thesis examination committee.
- The alleger could also have decided to use one of the existing research ethics routes i.e., *SOP for complaints management.*

Important note: Under no circumstances should an initial assessment be conducted by any party other than the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO linked to the office of the DVC R&I.

No matter where the reporting originated from, should the person decide to proceed with the allegation(s), the case is reported to the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO by the person receiving the allegation(s) *within two working days* after receiving the allegation(s).

No matter the route followed by the alleger of reporting the alleged, the *identity* of the alleger should always be protected and kept confidential and only be made known to the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO. Should the allegation, however, prove to have substance and defensibility, *the alleger could be asked to verbally present his/her allegations to the SRIC, and the ad hoc members* should it move to a formal intra-faculty assessment or preliminary intra-faculty investigation. However, this may not always be necessary if the evidence is clear.

9.3.2 The steps in handling allegations

- 1) Initial informal intra-faculty research integrity assessment into the *merit and formal grounds* of the allegation(s) by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO in the office of the DVC: R&I only and the decision whether the process should continue.
- 2) Two possible processes based on the nature of the case:
- 2.1) For *plagiarism*: A *formal intra-faculty research integrity assessment* by the SRIC and consulting attorney in the legal office if deemed necessary.
- 2.2) For *fabrication of falsification*: A *preliminary intra-faculty research integrity investigation* by the SRIC, independent consulting attorney in the legal office and two independent experts.
- 3) Implementing the outcomes of the formal intra-faculty research integrity assessment (for plagiarism) or preliminary intra-faculty research integrity investigation (for fabrication or falsification).
- 4) Reporting and recording.

9.3.2.1 Informal Intra-faculty Research Integrity Assessment

On receiving a written allegation of a potential breach in RCR/RI, the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO in the office of the DVC: R&I, launches an initial *informal intra-faculty research integrity assessment* into the *merit and formal grounds of the allegation* of potential research misconduct, before deciding to proceed to a more *formal intra-faculty research integrity assessment* (for plagiarism) or a *preliminary intra-faculty research integrity investigation* (for fabrication and/or falsification).

This assessment is done with the hard evidence provided by the alleger and handled at face value.

The focus of the initial informal intra-faculty research integrity assessment is to determine *whether an answerable case* can be made out:

- Is it a valid complaint (research misconduct through an act of fabrication, falsification and/or plagiarism?
- Is it in good faith and not malicious?
- Even if an anonymous reporting (no identifiable alleger) or "bad faith" complaint(s) was received it should not be disregarded and "due process" followed.

A final decision is taken whether the case has merit and formal grounds.

If the allegation(s) seem(s) to have merit and formal grounds of a *potential act of research misconduct*, the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO continues with the next step in the process and launches either a *formal intra-faculty research integrity assessment* (*for plagiarism*) or a preliminary intra-faculty research integrity investigation (for fabrication and/or *falsification*).

9.3.2.2 Two possible processes based on the nature of the case

Two possible processes are followed based on the nature of the research misconduct at hand, i.e.:

1) for *plagiarism* a *formal intra-faculty research integrity assessment* by the SRIC and a consulting attorney in the legal office if deemed necessary or

2) for *fabrication and falsification*, a *preliminary intra-faculty research integrity investigation* by the SRIC and appointed ad hoc members.

9.3.2.2.1 Formal intra-faculty research integrity assessment of potential plagiarism

A case number is allocated from the Research Integrity Register for a case of suggested plagiarism.

A risk management-based approach will be used.

The formal intra-faculty research integrity assessment is handled by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) as chairperson of the SRIC, the RIO in the office of the DVC: R&I, with an optional additional appointed independent consulting attorney in the legal office knowledgeable on research integrity. In *calling a meeting with the SRIC*, the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO, must rule out any possible *conflict of interest, bias* and *unfairness* and *prevent strained collegiality and power relationship*, especially when an alleged has positional power. *Confidentiality* and *due process* will be maintained throughout the process. All attempts should be made to mitigate any adverse effects on participants.

The Standing Research Integrity Committee (SRIC) as indicated in the definition section.

And

Ad hoc members:

• Appointed independent consulting attorney in the legal office knowledgeable about research integrity matters if deemed necessary.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO in the office of the DVC: R&I notifies the alleged researcher in writing (usually an email) that an allegation has been made against him/her and proof of plagiarism provided. A brief description of the allegation is provided, and a time and place provided to appear before the SRIC if deemed necessary.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO will as soon *as possible, but no later than a week* after receiving the allegation, call a meeting with the SRIC.

The formal intra-faculty research integrity assessment process should be prompt, discreet and effective, and should decide *within 10 working days*.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO decides whether he/she will make any material available to the SRIC before the meeting. The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO decide on the material to be made available and the secretariat ensures that the SRIC receives it in time. The SRIC and attorney in the legal office (if included) review materials available to them, draw from knowledgeable sources and collect relevant documentation, if necessary, to empower them for the assessment.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO decides whether the alleger will address the SRIC or whether the evidence and documentation are adequate. The alleger is notified of the time and place of the meeting and should avail him/herself should the SRIC deem it necessary. If a decision is made that the alleger should address the SRIC, he/she is called to the meeting.

The meeting begins with the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) supported by the RIO, welcoming all, and allowing time for introductions if necessary. The confidentiality of the matter is emphasised and each member's role during the assessment explained to them.

It is explained that the anonymity of the alleger will be respected, and he/she will not be called to present his/her case if the evidence is clear. If the SRIC deems it necessary to call the alleger to clarify facts it could be allowed, but anonymity must be respected. Note: *SOP for the management of whistleblowing pertaining to research ethics and research integrity* (SOP_NWU Research Integrity_7) should be followed to protect the anonymity if it is a case of whistleblowing.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO presents the case in detail to the SRIC with the necessary evidence and documentation at hand.

An important initial responsibility of the SRIC is to make sure that the allegation(s) was/were made in good faith.

Should the SRIC deem it necessary, the alleger is called to present his/her allegation and evidence and provide clarity.

Time is allowed for discussions, reflections, questions, and answers.

The alleged *could be called* to respond to the allegation made against him/her if deemed necessary or be requested to provide specific documents. The researcher is to cooperate with fact-finding during the assessment.

If the alleged is called:

- The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) makes it clear that this is a formal intra-faculty research integrity assessment, and that the researcher is not seen as guilty unless evidence proves otherwise.
- The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO presents the allegation to the researcher with a description of the evidence.
- The researcher is allowed time to respond to the allegation(s) and presents his/her side of the case.
- The researcher is excused from the meeting.

The SRIC continues with their discussion with all evidence at hand and comes to some form of a summarised version of the allegation of plagiarism and decides on a finding of *potential plagiarism*. They must come to a decision that there is efficient evidence to justify a formal investigation by the office of the Registrar or the student judicial office.

If the SRIC decides that there is evidence of potential plagiarism the case is escalated to the office of the Registrar or the student judicial office for a *formal investigation* into plagiarism.

Important note: If one of the actions directly affects a study, the REC should immediately be notified in writing by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO that the study needs to be suspended or terminated, etc.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the help of the RIO formulates a letter to the alleged explaining the allegation, the escalation process as well as the future process. In the letter the person is referred to the *NWU Policy on Academic Integrity (2018, revised 2021)* for further information.

Points mentioned in the letter:

- Findings of a potential breach in RCR/RI through the act of plagiarism.
- The process of escalation to the office of the Registrar or the student judicial office.
- The future process.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO formulates a second letter addressed to the office of the Registrar or the student judicial office to escalate the case to him/her.

An appointment is made with the ED (in larger Faculties) where the DD: R&I with the support of the RIO presents the case and the two letters to the ED. If the ED concurs with the findings and future actions suggested by the SRIC, he/she co-signs the necessary letters with the DD: R&I.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO informs the person that made the allegations of the findings and outcome of the formal intra-faculty research integrity assessment.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO sets up a meeting with the Registrar or the head of the student judicial office to formally hand over the letter of escalation and supporting documents of proof of potential plagiarism and explain the case. The ED and RIO join the meeting.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO keeps track of the progress made with the case by the Registrar's office or the student judicial office.

Once the case has been finalised the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) sign the case off.

The RIO closes the record.

9.3.2.2.2 Preliminary intra-faculty research integrity investigation into possible cases of fabrication and/or falsification

A case number is allocated from the Research Integrity Register of the Faculty for a case of fabrication and/or falsification.

A risk management-based approach will be used.

The preliminary intra-faculty research integrity investigation is handled by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) as chairperson, the RIO, the SRIC and specific ad hoc members (independent consulting attorney in the legal office and two independent experts). The ad hoc members are identified by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO. The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO must rule out any possible *conflict of interest, bias* and *unfairness* and *prevent strained collegiality and power relationship*, especially when an alleged has positional power. *Confidentiality* and *due process* will be maintained throughout the process. All attempts should be made to mitigate any adverse effects on participants.

The Standing Research Integrity Committee (SRIC) members are indicated in the definition section.

And

The ad hoc members:

- An independent consulting attorney in the legal office knowledgeable about research integrity matters.
- Two independent experts (Experts in the required issue at hand).

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) notifies the alleged researcher in writing (usually an email) that an allegation has been made against him/her. A brief description of the allegation is provided, and a time and place provided should he/she need to appear before the SRIC (Note: *From here on under 9.3.2.2.2 mention of SRIC includes the three ad hoc members*).

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO will as soon *as possible but not later than 15 working days* after receiving the allegation, call a meeting with the SRIC and appointed ad hoc members.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO provides the consulting attorney and the two independent experts with the allegation and the necessary documentation and/or data to launch an independent investigation based on the documentation and/or data. The two independent experts submit written reports *within 10 working days* and ready for the first meeting with the SRIC and the ad hoc members.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO decide on what material will be made available to the SRIC before the meeting. The secretariat ensures that the SRIC receives the material and two independent expert reports on time. The SRIC reviews materials and reports available to them, draws from knowledgeable sources, and collects relevant documentation, if necessary, to empower them for the investigation.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO decides whether the alleger will address the SRIC or whether the evidence, documentation and expert reports are adequate. The alleger is notified of the time and place of the meeting and should avail him/herself should the SRIC deem it necessary. If a decision is made that the alleger should address the SRIC, he/she is called to the meeting.

The meeting begins with the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO welcoming all and allowing time for introductions. The confidentiality of the matter is emphasised and each member's role during the assessment explained to them.

It is explained that the anonymity of the alleger will be respected, and he/she will not be called to present his/her case if the evidence is clear. However, if the SRIC deems it necessary to call the alleger to clarify facts it could be allowed but anonymity must be respected. Note: *SOP for the management of whistleblowing pertaining to research ethics and research integrity* (SOP_NWU Research Integrity_7) should be followed to protect the anonymity if it is a case of whistleblowing.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO, presents the case in detail to the SRIC and ad hoc members with the necessary evidence, documentation and/or data and reports at hand, as well as the expert reports.

An important initial responsibility of the SRIC is to make sure that the allegation(s) that are made, is made in good faith.

The independent consulting attorney in the legal office and two independent expert members provide their input.

Time is allowed for discussions, reflections, questions, and answers.

Should the SRIC deem it necessary the alleger is called to present his/her allegation and evidence and provide clarity.

Should the researcher be called he/she must cooperate with fact-finding during the assessment.

- The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) makes it clear that this is a preliminary intra-faculty research integrity investigation into potential fabrication and/or falsification and that the researcher is not seen as guilty unless proof of evidence shows the opposite.
- The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO presents the allegation to the researcher with a description of the evidence and reports.
- The researcher is allowed time to respond to the allegation(s) and presents his/her side of the case.
- The researcher is excused from the meeting.

The SRIC and ad hoc members continue with their discussion with all evidence and reports at hand, having heard the alleged side of the story and comes to some form of the summarised version of the allegation and decide on a finding of potential fabrication and/or falsification. They must come to a decision that the allegation proofs to have *substance* and *defensibility* and a finding of a *breach or no breach in RCR/RI through an act(s) of fabrication and/or falsification.* The SRIC should be prompt, discreet and effective, and should decide on the way forward.

If a *finding of a potential breach in RCR/RI through an act of fabrication and/or falsification is made*, the SRIC decides to escalate the case to the office of the Registrar or the student judicial office for the second phase of a formal investigation into fabrication and/or falsification.

Important note: If one of the actions directly affect a study, the REC should immediately be notified in writing by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and the RIO that the study needs to be suspended or terminated etc.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the help of the RIO formulates a letter to the alleged explaining the allegation, the escalation process as well as the future process. In the letter the person is referred to the *NWU Policy on Academic Integrity (2018, revised 2021)* for further information.

Points mentioned in the letter:

- Findings of a potential breach in RCR/RI through the act of plagiarism.
- The process of escalation to the office of the Registrar or the student judicial office.
- The future process.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO formulates a second letter addressed to the office of the Registrar or the head of the student judicial office to escalate the case to him/her and indicate the potential breach in RCR/RI through an act of fabrication and/or falsification. Note: It should be clear that the experts confirm the allegation made by the alleger.

An appointment is made with the ED where the DD: R&I (in the larger Faculties) with the support of the RIO presents the case and the two letters the ED. If the ED concurs with the findings and future actions suggested by the SRIC, he/she co-signs the letter with the DD: R&I.

The signed letter is sent to the researcher by the DD: R&I (larger Faculties) or ED (smaller Faculties) and the RIO notifying him/her of the escalation of the case to the office of the Registrar or the student judicial office.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO verbally informs the person that made the allegations of the findings and outcome of the preliminary intra-faculty investigation.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO sets up a meeting with the Registrar or the head of the student judicial office to formally hand over the letter of escalation and supporting documents of proof of fabrication and/or falsification and the reports of the two independent experts and explain the case. The ED and RIO join the meeting.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) with the support of the RIO keeps track of the progress made with the case by the Registrar's office or the student judicial office.

Once the case has been finalised the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) signs the case off.

The RIO closes the record.

9.3.2.3 Implementing the outcomes

The system set in place is to ensure the execution of all the actions according to the described process and set timelines with an effective feedback cycle through the required reporting system.

Transparency and procedural fairness are important.

The DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties) and RIO close the case and send a final notice to the ED.

9.3.2.4 Reporting and record-keeping

A register for research integrity cases is kept in the Faculty.

A number is allocated to each registered case.

A factual and objective mandatory report must be written after either the *formal intra-faculty research integrity assessment (plagiarism)* or the *preliminary intra-faculty research integrity investigation (fabrication and/or falsification)* and updated with a closing report at the end of the process. The RIO will be responsible for the report and approved by the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties).

The following should be included in the initial report:

- Name of the institution.
- Name of the Faculty.
- The research entity in which the researcher resides.
- Full names and surname of the researcher.
- Title of the research study (if applicable).
- Ethics number of the research study (if applicable).
- Personnel/student number.
- Date of the transgression(s).
- A detailed description of the misconduct.
- The evidence summarised (what available evidence and record(s)).
- The process followed.
- Finding(s) that indicate(s) the potential breach/no breach.
- Actions the Faculty is taking to address the potential breach in research integrity.
- Name of the RD.
- A final copy of the report must be stored in the office of the DD: R&I (in the larger Faculties) or the ED (in the smaller Faculties).

The following should be included in the closing report:

- Name of the institution.
- Name of the Faculty.
- The research entity in which the researcher resides.
- Full names and surname of the researcher.
- Name of the RD.
- Final actions taken by the Registrar or the student judicial office.
- Date of conclusion of the case.
- Summary of the conclusion process and comments from the RD and mentor.

10 SUMMARIZED PROCESSES

Diagram 1: Structure for the management of research misconduct





Diagram 3: Processes and procedures for the management of research misconduct (fabrication and falsification)



11 REFERENCE DOCUMENTS

SOP for complaint management (SOP of the Faculty REC).

SOP for the management of whistleblowing pertaining to research ethics and research integrity (SOP_NWU Research Integrity_7).

SOP for non-compliance of the University of Cape Town, 2013.

SOP for the management of continuous research non-compliance and/or violation of good research practice (SOP_NWU Research Integrity_2).

SOP for the management of the research integrity appeals process (SOP_NWU Research Integrity_4).

SOP for ethics committees of the University of the Western Cape.

Singapore Statement on Research Integrity, 2010.

The European Code of Conduct for Research Integrity (revised edition), 2017.

UCT policy and procedures for the breach of research ethics codes and allegations of misconduct in research, 2014.

NWU Behavioural Manual.

NWU Policy on Student Discipline, 26 September 2019.

NWU Policy on Academic Integrity, 27 September 2018 revised 2021.

12 ADDENDA

No	Document name
None	

Original details: SOP_NWU Research Integrity_3 Management of Research Misconduct, April 2022, revised November 2022.

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